



Commissioner for Patents  
Washington, DC 20231  
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Bib Data Sheet

CONFIRMATION NO. 6655

<b>SERIAL NUMBER</b> 09/207,339	<b>FILING DATE</b> 12/08/1998 <b>RULE</b>	<b>CLASS</b> 382	<b>GROUP ART UNIT</b> 2623	<b>ATTORNEY DOCKET NO.</b>	
<b>APPLICANTS</b> ALLEN W. L. TOPPING, SAN FRANCISCO, CA; VLADIMIR KUPERSHMIT, PLEASANTON, CA; AUSTIN GORMREY, NORTH MYRTLE BEACH, SC;					
<b>** CONTINUING DATA *****</b> <i>Verified in None</i>					
<b>** FOREIGN APPLICATIONS *****</b> <i>None</i>					
<b>** SMALL ENTITY **</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>vn</i> <u>                    </u> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> <i>28/14</i>	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> ALLEN W L TOPPING P.O. BOX 1566 TUBAC ,AZ 85646					
<b>TITLE</b> <i>Identification</i> <i>within</i> AUTOMATED IDENTIFICATION THROUGH ANALYSIS OF OPTICAL BIREFRINGENCE WITHIN NAIL BEDS					
<b>FILING FEE RECEIVED</b> 380	FEES: Authority has been given in Paper No. <u>          </u> to charge/credit DEPOSIT ACCOUNT No. <u>          </u> for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other <u>                    </u> <input type="checkbox"/> Credit		

PAT. NO. 09/207,339	FILING DATE 12/08/98	CLASS 382	GROUP ART UNIT <del>2721</del> 2623	ATTORNEY DOCKET NO.
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APPLICANT: ALLEN W. L. TOPPING, SAN FRANCISCO, CA; VLADIMIR KUPERSHMIT, PLEASANTON, CA; AUSTIN GORMREY, NORTH MYRTLE BEACH, SC.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*  
 VERIFIED  
VB

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*  
 VERIFIED  
VB

\*\*FOREIGN APPLICATIONS\*\*\*\*\*  
 VERIFIED  
VB

\*\*\*\*\* SMALL ENTITY \*\*\*\*\*

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 9	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
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ADDRESS: ALLEN W L TOPPING  
 44 DELMAR STREET  
 SAN FRANCISCO CA 94117

TITLE: AUTOMATED IDENTIFICATION THROUGH ANALYSIS OF OPTICAL BIREFRINGENCE  
 HWITIN NAIL BEDS

FILING FEE RECEIVED \$380	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
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